

STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: TheraPearl, LLC

Application No./Patent No.: 5,935,334

Filed/Issue Date: 7/12/2005

Title: THERMAL PACK FOR THE FEMALE BREAST

TheraPearl, LLC, a limited liability company

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignor of the entire right, title, and interest in
 2. ☐ an assignor of less than the entire right, title, and interest in
(The extent (by percentage) of its ownership interest is _____ %); or
 3. ☐ the assignee of an undivided interest in the entirety of (a complete assignment from one of the joint inventors was made);
- the patent application/patent identified above, by virtue of either:

A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded at the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy therefore is attached.

OR

B. ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:

1. From: Whitney W. Noonan To: Maternal Care, Inc.

The document was recorded in the United States Patent and Trademark Office at
Reel 014547, Frame 0595, or for which a copy thereof is attached.

2. From: Maternal Care, Inc. To: TheraPearl, LLC

The document was recorded in the United States Patent and Trademark Office at
Reel 025634, Frame 0250, or for which a copy thereof is attached.

3. From: _____ To: _____

The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet(s).

☒ As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08.]

This undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Carol Ballacer
Signature

4-25-11
Date

Carol Ballacer
Printed or Typed Name

Founder
Title

This collection of information is required by 37 CFR 3.73(b). This information is required to obtain or retain a benefit by the public which is to be paid by the USPTO to protect an invention. Confidentiality is governed by 36 U.S.C. 332 and 37 CFR 1.11 and 1.16. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed information form to the USPTO. Time will vary depending upon the individual case. Any comments on the burden of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1480, Alexandria, VA 22313-1480. (DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1480, Alexandria, VA 22313-1480.)

If you need assistance in completing the form, call 1-800-TD-9199 and select option 2.

POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	15672-132
	Filing Date	8/28/2009
	First Named Inventor	Whitney M. Hootman
	Title	THERMAL PACK FOR THE FEMALE S
	Art Unit	3739
	Examiner Name	Roane, Aaron F.
Attorney Docket Number	7059-715	

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

44362

OR

☐ I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Practitioner(s) Name	Registration Number

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number.

OR

☐ The address associated with Customer Number.

OR

☐ Please
Individual Name

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☐ Applicant/Inventor.

OR

☒ Assignee of record of the entire interest. See 37 CFR 1.71.
Statement under 37 CFR 1.73(a) (Form PTO-GB-95) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

Signature	Date
Carol Balazur	4-28-11
Name	Telephone
Theraplan, LLC	443-472-0718
Title and Company	

NOTE: If partners or all the partners or assignees of record of the entire interest or their representative(s) are required, current multiple forms if more than one. Signature is required, see below.

☒ Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.51, 1.52 and 1.58. The information is required to determine when a patent is issued by the Office which is to be (and by the USPTO to process) an application. Confidentiality is provided by 35 U.S.C. 122 and 37 CFR 1.11 and 1.16. This collection is estimated to take 2 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the content of this form should be sent to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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